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CONFIRMATION NO. 4535

<b>SERIAL NUMBER</b> 10/512,008	<b>FILING OR 371(c) DATE</b> 08/11/2005 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1633	<b>ATTORNEY DOCKET NO.</b> 36689.42
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/US03/12324 04/21/2003 which claims benefit of 60/374,083 04/19/2002

OK SDP

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
10/11/2006

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 23	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>Scott D. Loiler</u> Initials _____				

## ADDRESS

27683

## TITLE

Raav vector-based compositions and methods for the prevention and treatment of mammalian diseases

<b>FILING FEE RECEIVED</b> 973	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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